



Attorney's Docket No.: 42390.P5659

Patent

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

THOMAS J. HOLMAN

Serial No: 09/023,172

Filed: 2/13/98

For: MEMORY MODULE CONTROLLER
FOR PROVIDING AN INTERFACE
BETWEEN A SYSTEM
MEMORY CONTROLLER AND A
PLURALITY OF MEMORY DEVICES
ON A MEMORYMODULE (AS
AMENDED)

Examiner: Verbrugge, K.

Art Unit: 2751

Assistant Commissioner for Patents
Washington, D.C. 20231

AMENDMENT

Dear Sir:

In response to the Office Action mailed September 13, 1999, applicant respectfully requests the Examiner to enter the following amendments and consider the following remarks.

"Express Mail" mailing label number: EL143568953US

Date of Deposit: 3/2/00

I hereby certify that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Assistant Commissioner for Patents, Washington, D. C. 20231

JUANITA BRISCOE

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3/2/00

(Date signed)

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Attorney's Docket No.: 42390.P5659

In re the Application of: Thomas J. Holman

(inventor(s))

Application No.: 09/023,172

Filed: 2/13/98

For: MEMORY MODULE CONTROLLER FOR PROVIDING AN INTERFACE BETWEEN A SYSTEM
MEMORY CONTROLLER AND A PLURALITY OF MEMORY DEVICES ON A MEMORY MODULE

(as amended)

(title)

ASSISTANT COMMISSIONER FOR PATENTS

Washington, D.C. 20231

SIR: Transmitted herewith is an Amendment for the above application.

Small entity status of this application under 37 C.F.R. §§ 1.9 and 1.27 has been established by a verified statement previously submitted.

A verified statement to establish small entity status under 37 C.F.R. §§ 1.9 and 1.27 is enclosed.

No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)
	Claims Remaining After Amd.		Highest No. Previously Paid For	Present Extra
Total Claims	* 14	Minus	** 20	0
Indep. Claims	* 3	Minus	*** 3	0
First Presentation of Multiple Dependent Claim(s)				

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest No. Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

SMALL ENTITY	
Rate	Additional Fee
X9	\$
X39	\$
+130	\$
Total Add. Fee	\$

OTHER THAN A SMALL ENTITY	
Rate	Additional Fee
X18	\$
X78	\$
+260	\$
Total Add. Fee	\$

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JUANITA BRISCOE

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(Date signed)

A check in the amount of \$ is attached for presentation of additional claim(s).
 X Applicant(s) hereby Petition(s) for an Extension of Time of Three month(s) pursuant to
37 C.F.R. § 1.136(a).

 X A check for \$ 870.00 is attached for processing fees under 37 C.F.R. § 1.17.

 Please charge my Deposit Account No. 02-2666 the amount of \$.

A duplicate copy of this sheet is enclosed.

 X The Commissioner of Patents and Trademarks is hereby authorized to charge payment of the
following fees associated with this communication or credit any overpayment to Deposit Account
No. 02-2666 (a duplicate copy of this sheet is enclosed):

 X Any additional filing fees required under 37 C.F.R. § 1.16 for presentation of
extra claims.

 X Any extension or petition fees under 37 C.F.R. § 1.17.

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

Date: 3/26/2000

12400 Wilshire Boulevard
Seventh Floor
Los Angeles, California 90025
(408) 720-8598

 Sang Hui Kim
Sang Hui Michael Kim

Reg. No. 40,450



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JUANITA BUCSIC
(Typed or printed name of person mailing paper or fee)

Juanita Bucsic
(Signature of person mailing paper or fee)

3/2/00
(Date signed)

Serial/Patent No.: 09/023,172 Filing/Issue Date: 2/13/98
Client: INTEL CORPORATION
Title: MEMORY MODULE CONTROLLER FOR PROVIDING AN INTERFACE BETWEEN A SYSTEM MEMORY CONTROLLER AND A PLURALITY OF MEMORY DEVICES.....
BSTZ File No.: 42390.P5659 Atty/Secty Initials: LJV/MSK/jb
Date Mailed: 3/2/00 Docket Due Date: 3/13/00

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Amendment/Response (<u>14</u> pgs.) | <input checked="" type="checkbox"/> Express Mail No. <u>EL143568953 US</u> | <input checked="" type="checkbox"/> Check No. <u>33915</u> |
| <input type="checkbox"/> Appeal Brief (___ pgs.) (in triplicate) | <input checked="" type="checkbox"/> <u>3</u> Month(s) Extension of Time | Amt: <u>\$870</u> |
| <input type="checkbox"/> Application - Utility (___ pgs., with cover and abstract) | <input checked="" type="checkbox"/> Information Disclosure Statement & PTO-1449 (<u>4</u> pgs.) | <input checked="" type="checkbox"/> Check No. <u>33916</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Continuation (___ pgs.) | <input type="checkbox"/> Issue Fee Transmittal | Amt: <u>\$240</u> |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (___ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (___ pgs.) | <input checked="" type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (___ pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (___ pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (___ pgs.) | <input type="checkbox"/> Power of Attorney (___ pgs.) | |
| <input type="checkbox"/> Application - Provisional (___ pgs.) | <input type="checkbox"/> Preliminary Amendment (___ pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (___ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input type="checkbox"/> Declaration & POA (___ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (___ pgs.) | <input checked="" type="checkbox"/> Transmittal Letter, in duplicate (2x2 pgs.) | |
| <input type="checkbox"/> Drawings: ___ # of sheets includes ___ figures | <input type="checkbox"/> Fee Transmittal, in duplicate | |

☒ Other: Cited references, Abstract